United States Bankruptcy Court 61288, Houston TX 77208	SOUTHERN DISTRICT OF TEXAS P.O.Box (Houston Division)		
Name of Debtors	•	Case Number	e de la proposición de la completa del la completa de la completa del la completa de la completa del la completa de la completa del la co
XStage Stores, Inc., a Delaware corporation Specialty Retailers, Inc., a Texas corporation Specialty Retailers, Inc. (NV), a Nevada corporation		00-35078-H2-11 00-35079-H2-11 00-35080-H2-11	788-35821 Creditor ID#:
*place an "x" beside the name of the Debtor you are filing a claim against			United States Bankruptcy Court
Name of Creditor (The person or other entity to whom the debtor owes money or property): Ktxa-Tv Psg Of Ft Worth/Dallas Inc		Check box if you are aware that anyone else a filed a proof of claim relating to your claim. Attach copy of statement giving particulars.	
Name and address where notices should be "***********************************	T 752	Check box if you have never received any notices from the bankruptcy court in this case Check box if the address differs from the address on the envelope sent to you by the court.	Michael N. Milby, Clerk
Account or other number by which creditor		Check here replaces	iously filed claim, dated:
1. Basis for Claim Goods sold Services performed Money loaned Personal injury/wrongful death Taxes Other		Retiree benefits as defined in 11 L Wages, salaries, and compensation Your SS#: Unpaid compensation for services fromto	n (Fili out below) performed
2. Date debt was incurred: 🖒 🔾	000	3. If court Judgment, date of	otalned:
4. Total Amount of Claim at Time Case File If all or part of your claim is secured or entit	tied to priority, also complet t or other charges in additio	e Item 5 or 6 below.	Attach itemized statement of all interest or
 5. Secured Claim. — Check this box if your claim is secured right of setoff). — Brief Description of Collateral: — Real Estate — Motor Vehicle — Other All personal and intangible proposed in the collateral: Value of Collateral: \$ Amount of arrearage and other charges at secured claim, if any \$ 	perty of Debtor's Estate	6. Unsecured Priority Claim. Check this box if you have an unsecured priority claim Amount entitled to priority \$ Specify the priority of the claim: Wages, selaries, or commissions (up to \$4,300),* semed within 90 days before filing of the bankruptcy petition or cessation of the debtor's business, whichever is earlier - 11 U.S.C. § 507(a)(3) Contributions to an employee benefit plan - 11 U.S.C. § 507(a)(4). Up to \$1,950* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use - 11 U.S.C. § 507(a)(6). Allmony, maintenance, or support owed to a spouse, former spouse, or child - 11 U.S.C. 507(a)(7). Taxes or penalties owed to governmental units - 11 U.S.C. § 507(a)(8). Other - Specify applicable paragraph of 11 U.S.C. § 507(a). *Amounts are subject to adjustment on 4/1/98 and every 3 years thereafter with respect to cases commenced on or after the date of adjustment.	
The amount of all payments on this the purpose of making this proof of claim. 8. Supporting Documents: Attach copies notes, purchase orders, invoices, itemized statem court judgments, mortgages, security agreement DO NOT SEND ORIGINAL DOCUMENTS. If the explain. If the documents are voluminous, attach services a stamped Copy: To receive an ack enclose a stamped, self-addressed envelope and Sign and print the name and to attach copy of power of attention.	e of supporting documents, such nents of running accounts, contains, and evidence of perfection of documents are not available, a summary. I copy of this proof of claim.	ı aş promişşory racts, f Ilen,	This Space is for Court Use Only

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